10/714,678

12/04/2002

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FORM

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Application Number

Filing Date

FORM			First Named Inventor Hans Christian Alt			stian Alt		
			Art Unit		1754			
(to be used for all correspondence after initial filing)			Examiner Name		Ardith E. H	lertzog		
Total Number of Pages in This Submission 5			Attorney Docket N	umber	032301.354			
ENCLOSURES (check all that apply)								
Fee Transmittal Form		Drawing(s	s)		After Allowance Communication to TC			
☐ Fee Attached		Licensing	-related Papers			Communication to Board als and Interferences		
Amendment / Reply		Petition	,			Communication to TC lotice, Brief, Reply Brief)		
After Final		Petition to Convert to a Provisional Application			Proprieta	ary Information		
Affidavits/declaration(s)		Power of Attorney, Revocation Change of Correspondence Address			Status Letter			
Extension of Time Request		Terminal Disclaimer			Other Enclosure(s) (please identify below):			
	🗆	Request for Refund			postcard \$1,500 check			
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Certified Copy of Priority Document(s)	Re	marks						
Reply to Missing Parts/								
Incomplete Application								
Reply to Missing Parts under 37 CFR1.52 or 1.5	53							
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT								
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Signature			Mul					
Printed Name	acher							
Date 05/06/06			Reg. No.	20,531				
CERTIFICATE OF TRANSMISSION/MAILING								
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.								
Signature								
Typed or printed name Juga Wilson					Date	05/06/05		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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	ive on 12/08/2		1818)			omplete if			
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL			Application Numb	cation Number 10/714,678					
1			\ L	Filing Date		2/04/200			
Foi	r FY 2	005		First Named Inve		lans Chris			
Analisant alaims amall	Examiner Name		Ardith E. Hertzog						
Applicant claims small	Applicant claims small entity status. See 37 CFR 1.27				1	1754			
TOTAL AMOUNT OF PAYE	MENT (\$	2,000.00		Attorney Docket I	No. 0	32301.35	4		
METHOD OF PAYMENT	Γ (check al	that apply)							
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under 37 CFR WARNING: Information on this	1 16 and 1	17		, , <u>, , , , , , , , , , , , , , , , , </u>	-	•	orm. Provide	e credit ca	ırd
information and authorization			00.0						
FEE CALCULATION									
1. BASIC FILING, SEAR	RCH, AND	EXAMINATION F							
	FILING	FEES Small Entity	SEAR	CH FEES Small Entity	EXAMI	NATION F Small En			
Application Type	Fee (\$)	Fee (\$)	Fee (\$		Fee (S			Fees Pa	iid (\$)
Utility	300	150	500	250	200	100	_		
Design	200	100	100	50	130	65	-		
Plant	200	100	300	150	160	80	-		
Reissue	300	150	500	250	600	300	-		
Provisional	200	100	0	0	0	0	-		
2. EXCESS CLAIM FEE	S							Fee (\$)	Small Entity
Fee Description Each claim over 20 or, fo	r Dairenae	each claim over	20 and	more than in the	- origin	al natent		50	<u>Fee (\$)</u> 25
Each claim over 20 or, 10	or Keissues over 3 or f	or Reissues each	indene	endent claim moi	re than	in the origi	inal patent		100
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent 200 Multiple dependent claims 180							180		
Total Claims	Extra Claim	s <u>Fee (\$)</u>	Fee I	<u> Paid (\$)</u>		<u>Depender</u>			
- 20 or HP =	laine naid fa	X=			<u>Fee</u>	<u>(\$)</u>	Fee Paid ((\$)	
HP = highest number of total of Indep. Claims	Extra Claim		Fee F	Paid (\$)					
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3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)									
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).									
Total Sheets									
/ 50 = (round up to a whole number) x =									
4. OTHER FEE(S) Fees Paid (\$)									
Non-English Specification, \$130 fee (no small entity discount) Other: Petition for Revival (fee \$1,500), Notice of Appeal (fee \$500) \$2,000.00									
Other: Petition for F	kevival (fe	e \$1,500), Notic	ce of A	ppear (ree \$50	U)	<u> </u>		⊅∠, U	00.00

SUBMITTED BY	//	111			
Signature	- //	1/W/	M	Registration No. 20,531 (Attorney/Agent)	Telephone (404) 815-3593
Name (Print/Type)	Robert 6	Weila	cher		Date 05/06/05

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.